Approved for use through 1/31/2007. OMB 0651-0032
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 09/475,452			ing Date 30/1999	To be Mailed	
APPLICATION AS FILED – PART I (Column 1) (Column 2)							SMALL ENTITY			OTHER THAN		
Н	FOR		NUMBER FILED		NUMBER EXTRA		RATE (\$)	FEE (\$)	T	RATE (\$)	FEE (\$)	
	BASIC FEE (37 CFR 1.16(a), (b),	_	N/A	LED ING	N/A		N/A	TEE (#)	ł	N/A	TEE (#)	
	SEARCH FEE		N/A		N/A		N/A		1	N/A		
П	(37 CFR 1.16(k), (f), (EXAMINATION FE	E	N/A		N/A		N/A		ł	N/A		
	(37 CFR 1.16(o), (p), (FAL CLAIMS	or (q))	minus 20 =				x s =		OR	x s =		
IND	CFR 1.16(i)) EPENDENT CLAIM	s				H	x \$ =		-	x s =		
(37	CFR 1.16(h))	If the	minus 3 = * If the specification and drawi		ae avanad 100	łΙ	A \$ -		1	^ -		
	APPLICATION SIZE (37 CFR 1.18(s))	FEE shee is \$2 addit	ts of pape 50 (\$125 ional 50 s	n size fee due								
	MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))								J			
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL]	TOTAL		
	APPI	OED - PART II		OTHER THAN SMALL ENTITY OR SMALL ENTITY								
AMENDMENT	10/31/2007	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.16(i))	• 13	Minus	·· 20	= 0	П	x s =		OR	X \$50=	0	
	Independent (37 CFR 1,16(h))	• 3	Minus	···3	= 0	1	x \$ =		OR	X \$210=	0	
	Application Size Fee (37 CFR 1.16(s))											
1	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR			
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0	
		(Column 1)		(Column 2)	(Column 3)							
L		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
Ä	Total (37 CFR 1,16())	*	Minus	**	-]	x \$ =		OR	x \$ =		
AMENDMENT	Independent (37 CFR 1.16(h))	•	Minus	***	=]	x \$ =		OR	x \$ =		
Ш	Application Size Fee (37 CFR 1.16(s))					11			1			
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(j))								OR			
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
If the entry in column 1 is less than the entry in column 2, write '0' in column 3. If the "Highest Number Previously Paid For In THIS SPACE is less than 20, enter '20'. If the "Highest Number Previously Paid For In THIS SPACE is less than 3, enter '3'. The "Highest Number Previously Paid For "(Total or independent) is the highest number found in the appropriate box in column 1.												

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